

917770

Requestor's Name

Address

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

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 -04/04/97--01046--003
 *****612.50 *****87.50

RENEWAL

Name Available	917770
Document Examiner	NJC
Updater	NJC
Updater Verifier	NJC
Acknowledgement	NJC
W. P. Verifier	NJC

Examiner's Initials

Florida Department of State, Sandra B. Mortham, Secretary of State

MARK RENEWAL APPLICATION

514071

Mark Registered: RABANO YODADO (HORSERADISH IODIZED)

Registration Number: 9 1 7 7 7 0

Date Filed: 05/25/77 Renewal Date: 05/25/97 Class(es) Filed: 18

Renewal statement pursuant to section 495.071, Florida Statutes. (Below you must state the mark is still in use in Florida or the reason for its nonuse.)

This mark is still in use in State of Florida

If applicant is a corporation, enter the state of incorporation: FLORIDA

I, Mariazel D. Elorduy being sworn, depose and say that I am the President of the applicant herein, and make this affidavit and verification on behalf of its and I have read this application and know the contents thereof and that the facts stated herein are true and correct.

DUY DRUGS, INC.

Name of business in which mark is filed, if any

Mariazel D. Elorduy
Applicant, or authorized officer (give title)
President

Signed

On this 27th day of March, 1997, Mariazel D. Elorduy personally appeared before me,

☒ Who is personally known to me

☐ Whose identity I proved on the basis of _____

(Notary Seal)



[Signature]
Signature of Notary Public